## PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

563.2-6259-USOB

|   |   | CLAIMS AS                                 |              | FILED - PART I<br>(Column 1)   |              | mo 2)            | SMALL ENTITY TYPE   |                        | OR  | OTHER THAN<br>OR SMALL ENTITY |                        |
|---|---|---|--------------|--------------------------------|--------------|------------------|---------------------|------------------------|-----|-------------------------------|------------------------|
| TOTAL CLAIMS  |   |   | 16           |                                |              |                  | RATE                | FEE                    |     | RATE                          | FEE                    |
| FOR   |   |   | NUMBER FILED |                                | NUMBER EXTRA |                  | BASIC FEE           | 375.00                 | OR  | Basic Fee                     | 750.00                 |
| TOTAL CHARGEABLE CLAIMS   |   |   | / minus 20=  |                                | * Ø          |                  | X\$ 9=              |                        | OR  | X\$18=                        |                        |
| INDEPENDENT CLAIMS  |   |   | minus 3 =    |                                | * 0          |                  | X42=                |                        | OR. | X84=                          |                        |
| MU  | ILTIPLE DEPEN                                   | IDENT CLAIM PI                            | IESENT       |                                |              |                  | +140=               |                        | OR  | +280=                         |                        |
| * If the difference in column 1 is less than zero, enter "  |   |   |              |                                |              | olumn 2          | TOTAL               |                        | OR  | TOTAL                         | 750                    |
| ¥. ¥  | C   |   |              |                                | OTHER        |                  |                     |                        |     |                               |                        |
| (Column 1)  |   |   | (Colum       |                                |              |                  | SMALL               | SMALL ENTITY           |     | SMALL                         |                        |
| AMENDIMENT A  |   | CLAM/S<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGA<br>NUMI<br>PREVIO<br>PAID | BER<br>OUSLY | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus        | **                             |              | =                | X\$ 9=              |                        | OR  | X\$18=                        |                        |
|   | Independent                                     | *   | Minus        | ***                            | • 🗛 • • • •  | =                | X42=                |                        | OR  | X84=                          |                        |
| Ļ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                                |              |                  | +140=               |                        | OR  | +280=                         |                        |
|   |   |   |              |                                |              |                  | TOTAL<br>ADDIT, FEE |                        | OR  | TOTAL<br>ADDIT. FEE           |                        |
|   |   | (Column 1)                                |              | (Colur                         |              | (Column 3)       | neonitus            |                        | •   | urur773fipolosi               |                        |
| AMENDMENT B   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>DUSLY | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus        | **                             |              | =                | X\$ 9=              |                        | OR  | X\$18=                        |                        |
|   | Independent                                     | *<br>NTATION OF M                         | Minus        | ***                            | CL AIRA      | =                | X42=                |                        | OR  | X84≃                          |                        |
| L   | I HOI FRESE                                     | MINITON OF IM                             | JUNECE DE    | CINDEINI                       | CLAIM        |                  | +140=               |                        | OR  | +280=                         | . `                    |
|   | •   |   |              |                                |              |                  | TOTAL<br>ADDIT. FEE |                        | OR  | TOTAL<br>ADOIT. FEE           |                        |
|   | (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST |   |              |                                |              |                  |                     |                        |     |                               |                        |
| AMENDMENT C   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVK<br>PAID   | BER<br>DUSLY | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                          | ADDI-<br>TIONAL<br>FEE |
|   | Total   | *   | Minus        | **                             |              | =                | X\$ 9=              |                        | OR  | X\$18=                        |                        |
|   | Independent                                     | *   | Minus        | ***                            |              | =                | X42=                |                        | OR  | X84=                          |                        |
| Ľ   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |              |                                |              |                  |                     |                        |     |                               |                        |
| +140=  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |   |   |              |                                |              |                  |                     |                        | OR  | +280=                         |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |   |   |              |                                |              |                  |                     |                        |     |                               |                        |